



THE UNIVERSITY *of* EDINBURGH

Edinburgh Research Explorer

Seroprevalence of *Toxoplasma gondii* infection in Camels (*Camelus dromedaries*) in & around Bahawalpur

Citation for published version:

Chaudhry, U 2007, 'Seroprevalence of *Toxoplasma gondii* infection in Camels (*Camelus dromedaries*) in & around Bahawalpur'.

Link:

[Link to publication record in Edinburgh Research Explorer](#)

General rights

Copyright for the publications made accessible via the Edinburgh Research Explorer is retained by the author(s) and / or other copyright owners and it is a condition of accessing these publications that users recognise and abide by the legal requirements associated with these rights.

Take down policy

The University of Edinburgh has made every reasonable effort to ensure that Edinburgh Research Explorer content complies with UK legislation. If you believe that the public display of this file breaches copyright please contact openaccess@ed.ac.uk providing details, and we will remove access to the work immediately and investigate your claim.



**Seroprevalence of *Toxoplasma gondii* infection in Camels
(*Camelus dromedaries*) in & around Bahawalpur**

Umer Naveed Chaudhary

2005- VA- 190

D.V.M

**A THESIS SUBMITTED IN THE PARTIAL FULFILLMENT
OF THE REQUIREMENT FOR THE DEGREE**

**OF
MASTER OF PHILOSOPHY
IN
PARASITOLOGY**



**UNIVERSITY OF VETERINARY AND ANIMAL
SCIENCES, LAHORE**

2005 - 2007

TO,

The Controller of Examinations,
University of Veterinary & animal sciences,
Lahore.

We, the supervisory committee, certify that the contents and form of the thesis, submitted by **Mr. Umer Naveed Chaudhary Regd. No 2005-VA-190** have been found satisfactory and recommend that it be processed for the evaluation by the external examination (s) for award of the degree.

Supervisory Committee

Supervisor:

Dr. Kamran Ashraf

Co-Supervisor:

Dr. M. Ashraf

Member:

Prof.Dr. Azhar Maqbool

Member:

Prof. Dr. M Sarwar khan

**IN THE NAME OF ALLAH,
THE COMPASSIONATE, THE MERCIFUL**

All Praises and thanks are for

Almighty ALLAH,

The source of all knowledge and wisdom

Endowed to mankind, who guides us in

Darkness and helps us in difficulties

And all respects are for his last

Holy prophet

HAZRAT MUHAMMAD

(Peace Be Upon Him)

Who enabled us to recognize our creator

**WISDOM IS THE PART AND PARCEL
OF MY RELIGION,
KNOWLEDGE MY DRESS,
PATIENCE MY WEAPON,
FAITH MY DIET,
AND SINCERITY
MY COMPANION**

(HADIS-E-NABVI)

DEDICATION

To my dear parents, sisters & wife

Who dedicated their lives for me

Dearest mother and father & sisters,

I know and understand, you actually gave me

More than one life, my own and yours.

So much of what I have become is just because of you.

I can only show you my extreme appreciation for your

Support by being true to all the ideals and values that

You tried to teach me,

Thanks your forever for standing by me.

Today my definition of happiness is being with you

Umer Naveed Chaudhary

ACKNOWLEDGMENT

I would like to pay all my praises and humblest thanks to most Gracious, Merciful and Almighty **ALLAH** who bestowed me with potential and ability to contribute some material to the existing knowledge in the field of Parasitology and made every things possible for me to complete my Mphil degree. I offer my humblest thanks from the core of my heart to the **HOLY PROPHET HAZRAT MUHAMMAD (P.B.U.H)** who is forever a torch of guidance and knowledge for humanity as a whole.

I deem it as my utmost pleasure to avail this express the heartiest gratitude and deep sense of obligation to my venerated supervisor **Dr. Kamran Ashraf**, Assistant Professor, Department of Parasitology, University of Veterinary and Animal Science, Lahore. His skillful guidance, unfailing patience, masterly advice and inspiring attitude made it very easy to undertake this work and to write this manuscript.

I have the honor to express my deep sense of gratitude and profound indebtedness to members of supervisory committee. **Dr. Azhar Maqbool** Professor and Chairman Department of Parasitology and **Dr. Sarwar Khan**, Professor, Department of Clinical Medicine & Surgery, University of Veterinary and Animal Science, Lahore for their generous guidance, expert advice and skillful suggestions during the course of my study.

I gratefully acknowledge invaluable help render by my Co-Supervisor **Dr. M. Ashraf** (Project Director) livestock & dairy development department cooper road Lahore, who gave me time, energy and offered me solace substances and insight during the conduct of

this study. He always available when I needed him.

I am extremely thankful to **Dr. M Imran Rashid** Assistant Professor, Department of Parasitology and **Dr. Waseem Shazad** Assistant Professor, Department of Parasitology for their great help and guidance in every step.

I find no word to express my gratitude to my father **Ghulam Rasul**, my beloved mother, my elder sister, who not only inspired me but also supported to carry myself through the noble ideas of life and their best wishes for my health and success.

At the end, it is customary to say that all errors and omissions are of me alone.

UMER NAVEED CH

CONTENTS

- DEDICATION
- ACKNOWLEDGMENT
- LIST OF PLATES
- LIST OF TABLES
- LIST OF FIGURES

S. NO.	CHAPTER	PAGE NO
1.	INTRODUCTION	12
2.	REVIEW OF LITERATURE	16
3.	MATERIALS AND METHODS	31
4.	RESULTS	40
5.	DISCUSSION	45
6.	SUMMARY	50
7.	LITERATURE CITED	52

LIST OF TABLES

TABLE NO.	TITLE	PAGE NO.
1.	Overall Prevalence of <i>Toxoplasma gondii</i> antibodies in Camels by using Latex Agglutination Test (LAT) in relation to their age.	42
2.	Overall Prevalence of <i>Toxoplasma gondii</i> antibodies in Camels by using Latex Agglutination Test (LAT) in relation to their sex	43

LIST OF FIGURES

FIGURE	TITLE	PAGE NO.
1.	Toxoplasma Latex Kit	37
2.	Micro Titer Pipette	37
3.	Micro Titer Plate	37
4.	Overall Prevalence of <i>Toxoplasma</i> antibodies in Camel by using Latex Agglutination Test (LAT) in relation to their age	42
5.	Overall Prevalence of <i>Toxoplasma</i> antibodies in Camel by using Latex Agglutination Test (LAT) in relation to their sex	43

LIST OF PLATES

TABLENO.	TITLE	PAGE NO.
1.	Blood Samples And Serum Samples	34
2.	The <i>Toxoplasma</i> Latex kit	37
3.	Dispensing of Serum Samples and Latex Reagent	39
4.	Stirring of serum sample and Latex Reagent	39
5.	Agglutination of Latex Reagent with Antibodies at screening dilution of 1:16, 1:28, 1: 256	44

INTRODUCTION

CHAPTER 1

INTRODUCTION

Toxoplasma gondii is an intracellular protozoan parasite (Smith 1995) which infects humans as well as wide variety of mammals and birds (Hill *et al.*, 1998). Toxoplasmosis is found throughout the world and tends to be more prevalent in tropical climates (Dubey 1999). The organism was first discovered by Nicolle and Manceaux (1908) as a tissue parasite of *gondii* (an African rodent), and Darling found it in Man (Subash 1990). The infection has been confirmed in some 200 species of mammals including man and in domestic / wild felines, which are the only definitive host (Pedro *et al.*, 2003).

Toxoplasma gondii exhibits a predator-prey type life cycle having two phases (Torada 2001). The intestinal phase of the infection occurs only in felines when the cysts are ingested by a cat and multiply asexually by merogony and then sexually by gametogony and produce oocyst (Pedro *et al.*, 2003). The tissue phases occur in intermediate host, when sporulated oocyst ingests and penetrate through intestinal wall and spread by haematogenous route. This stage is called tachyzoite. The tachyzoite infect tissues throughout the body and replicate intracellular until the cell burst and cause tissue necrosis. As a result there is formation of tissue cysts containing bradyzoites. Tachyzoites and bradyzoites in extra intestinal tissue including muscles, liver, lungs, spleen and brain (Urquhart *et al.*, 2000).

The source of transmission is the ingestion of vegetables, fruits, water, soil, food contaminated by cat faeces, raw or undercooked meat. Flies and cockroaches may act as a

mechanical carrier to transfer oocysts to different varieties of foods. Other sources include transplacental transmission, from mother to the offspring through milk, transplantation of organs, transfusion of blood and venereal transmission (Pedro *et al.*, 2003).

Toxoplasma gondii can cause severe acquired infection in animals and human beings, which may be localized or generalized. Lymphadenitis is the most frequently observed clinical sign (deep cervical nodes). Other signs include fever, retinochoroiditis, uveitis, malaise, muscle pain, muscle fatigue, sore throat, headache, hepatitis, myocarditis and pneumonia. Encephalitis is an important sign of *Toxoplasma* in later stages. During the 1980s toxoplasmic encephalitis in humans emerged as a common complication associated with AIDS (Subash 1990).

As for as congenital infection is concerned, animals and pregnant women develop the most serious side effects leading to spontaneous abortion, still birth, birth defects, mummification, neonatal losses or fetal abnormalities including microcephalya, hydrocephalya, brain calcifications, psychomotor & mental retardation. The mechanism of vertical transmission is not yet understood (Remington *et al.*, 1995).

The disease has zoonotic importance in human population and depending upon the geographic location. In human 15 – 80 % population is infected with *toxoplasmosis*. Approximately 500 million populations are estimated to have antibodies to *T. gondii* infection (Subash.1990). Study has shown that between 16% to 40% of the human population in North America and Great Britain, 50% to 80% of the populations in Europe

and Latin America have antibodies of *T. gondii*, indicating that they have got infection at some time (Pedro *et al.*, 2003).

Serodiagnosis has been a reliable tool to diagnose *Toxoplasma* infection in both man and animals, using various serological tests, such as indirect haemagglutination, indirect immunofluorescent technique, and Enzyme linked immunosorbant assay and latex agglutination test (Ahmed *et al.*, 1983). Due to increasing risk of public health by ingestion of contaminated meat, toxoplasmosis has become extremely important zoonotic disease.

Camel meat is commonly being consumed, so that camel is the most vulnerable to the exposure of toxoplasmosis which may become the potential source of infection for the consumers; so far as no literature could be traced relating to the investigation of toxoplasmosis in Pakistan in camels. Therefore, keeping in view the importance of disease, study on seroprevalence of *Toxoplasma gondii* in camels were carried out, which would be helpful to adopt the control measures against the diseases in humans.

REVIEW OF LITERATURE

CHAPTER 2

REVIEW OF LITERATURE

Ridi *et al*, (1990) conducted study to estimate the prevalence of *Toxoplasma* antibodies among farm animals in Zigzags slaughterhouses using indirect haemagglutination test (IHAT) and to evaluate the occupational exposure to infected animals and meat among abattoir workers. 25% of the tested animals were seropositive. 19.2% of the exposed persons showed positive reactions while in a control group it was 12% with statistically insignificant difference.

Hagemoser *et al*, (1990) examined 6-year-old camel having history of dyspnoea of unknown duration. Approximately 24 L of turbid fluid was drained from the pleural cavity. Numerous *Toxoplasma gondii* tachyzoites were found in macrophages in smears of the pleural fluid. High titers (1:20,000) of *T. gondii* antibodies were found in pleural fluid.

Elamin *et. al*, (1991) tested a total of 482 serum samples from pastoral camels in the Butana plains, mid-Eastern Sudan, for *Toxoplasma* antibodies by the latex agglutination test (LAT). 67% of the camels were seroreactive. The prevalence rate of seroreactivity increased significantly with age (P less than 0.01) and was highest among camels aged over 7 years (74.2%). The prevalence rate of seropositivity decreased proportionally with the level of serum dilution. At dilutions of 1:32 and above, the prevalence rate was 25.9%. There were no sex-linked differences in seroreactivity. This study suggests widespread infection with *T. gondii* among pastoral camels, a finding that warrants a closer look into the possible ways infection is acquired by camels in their arid

environment, its economic impact, as well as its public health significance, especially among the nomads who consume cameline milk and liver raw.

Dubey et al, (1992) tested serum samples from 283 llamas (*Lama glama*) from Oregon, Washington State and Idaho for antibodies to *Toxoplasma gondii* using the modified agglutination test. Antibodies were found in 95 (33.5%) llamas. Percent seropositivity in serum dilutions of 1:25, 1:50, 1:500, and 1:5000 was 9.5%, 18.3%, 4.9%, and 0.7%, respectively.

Lings et al, (1994) examined 217 slaughter men and a control group of 113 greenhouse workers were investigated for the prevalence of serum antibodies to *Toxoplasma gondii*, *Campylobacter jejuni* (IgA and IgG), *Yersinia enterocolitica* types 3 and 9, *Yersinia pseudotuberculosis* types I, II, III, IV, and V, *Salmonella typhi*, *Salmonella paratyphi*, *Salmonella enteritidis*, *Salmonella typhimurium*, and *Borrelia burgdorferi*. No significant differences were found concerning either frequency of positive tests or magnitude of titers. The prevalence of toxoplasma antibodies was remarkably high in both groups.

Chaudhary et Al, (1996) reported 18% incidence of Toxoplasmosis in racing camels. A significant ($P < 0.05$) decrease of the WBCs and an increase in eosinophilic counts was observed in camels positive to Toxoplasmosis. The blood chemistry parameters (alkaline phosphatase, alanine aminotransferase, creatinine phosphokinase, lactic dehydrogenase, urea, total protein, calcium, creatinine, phosphorus, iron, and albumin) were not influenced in camels bearing antibodies against *Toxoplasma*.

Fortier et al, (1996) reported that tachyzoite-bradyzoite interconversion is one characteristic feature of *Toxoplasma gondii*. Although highly similar in structure, tachyzoite and bradyzoite differ by the relative amount of certain organelles and by specific surface or cytoplasmic molecules. Differences in structure and contents also exist between parasitophorous vacuoles and cysts. Using stage specific markers, it was shown the quickness of stage switching in vivo as well as in vitro, together with the occurrence of intermediate stages. Regulatory mechanisms of interconversion remain unknown. However, stress or inhibition of the mitochondrial metabolism of the parasite trigger bradyzoite formation.

Ibrahim et al, (1997) reported that *Toxoplasma gondii* is one of the important zoonotic parasite of worldwide zoological and geographical distribution. In this paper, *Toxoplasma* antibodies were investigated among workers (21) and slaughtered animals (258) in Tanta abattoir. The indirect haemagglutination test (IHAT) was positive among workers (52.4%) at titers 1/64, 1/256, 1/512 and slaughtered animals (44.1%), at titers > 1:64. The indirect fluorescent antibody test (IFAT done for animals only) was positive (48.8%) at titers 1/40. Histopathological study on infected prescapular lymph nodes of the examined animals showed different clinical pictures, which coincided with the serological results. It was concluded that meat should not be consumed uncooked or undercooked.

Hussein et al, (1998) examined Serum samples from 227 Saudi Arabian camels for *Toxoplasma gondii* antibodies by the indirect haemagglutination test, using a microtitre technique. Agglutinations (greater than 2+) occurring at 1:64 dilution were considered

positive. A total of 36 (16%) camels were serologically positive for toxoplasmosis, giving titres ranging between 1:64 and 1:8192. The prevalence was much higher in female compared to male camels and in adults compared to young individuals.

Hilali *et al.*, (1998) examined sera from camels from Egypt were examined by the direct agglutination tests incorporating mercaptoethanol for antibodies to *Neospora caninum* and *Toxoplasma gondii*. Antibodies to *N. caninum* were found in 6 of 161 camels in titers of 1:40 (2 camels) and 1:80, 1:160, 1:640, and 1:1280 in 1 camel each, using *N. caninum* formalin preserved whole tachyzoites as antigen. Antibodies to *T. gondii* were found in 17.4% of 166 camels in titers of 1:25 (3 camels), 1:50 (18 camels). and > 1:500 (8 camels) using *T. gondii* tachyzoites. All 6 camels with *N. caninum* antibodies had no *T.gondii* antibodies in 1:4 dilution of serum, indicating specificity of the reaction. This is the first report of *N. caninum* prevalence in Egypt.

Lyons *et. al.*, (2001) reported that *Toxoplasma gondii* exists as 2 life-cycle forms in intermediate hosts. The rapidly dividing tachyzoites responsible for acute disease, present in the first 14 days of infection, give rise to slowly dividing bradyzoites that reside in tissue cysts. Reactivation of disease is associated with conversion of bradyzoites to tachyzoites. A sensitive method for detection and assessment of the number of each life-cycle stage would be useful for following these events. Herein we describe the construction and validation of a plasmid (pSWITCH) containing a polycompetitor construct (SWITCH) for use in competitive reverse transcriptase-PCR (cRT-PCR). pSWITCH contains competitors for SAG2A and LDH2 genes, which are exclusively expressed by tachyzoite and bradyzoite stages respectively, and for beta-tubulin, a gene

expressed by both stages. Using cRT-PCR, samples can first be accurately normalized for expression of the housekeeping gene, beta-tubulin and then the relative levels of SAG2A and LDH2 expression compared to follow stage conversion. The abundance of transcripts for other genes of interest can then be followed during this process as demonstrated here for the SAG2-related family of genes. This technique offers a powerful tool for studying the processes involved in tachyzoite and bradyzoite interconversion.

Tomavo *et al*, (2001) studied that *Toxoplasma gondii* has the ability to switch between a rapidly replicating tachyzoite and a slowly dividing encysted bradyzoite within its intermediate hosts. It is likely that in vivo, the tachyzoites differentiate into encysted bradyzoites in response to the immune system attack during disease progression. As part of a developmental strategy and, in order to survive within infected hosts, *T. gondii* tachyzoites undergo profound metabolic and morphological changes by differentiating into encysted bradyzoites. Bradyzoites are characterised by their resistance to both the immune system and chemotherapy. The stimulus that triggers *Toxoplasma* encystation and the molecular mechanisms triggering the switch from tachyzoite to bradyzoite remain unknown. It is very important to elucidate these mechanisms since bradyzoites within tissue cysts are not only the source of infection transmitted from domestic animals to humans, but can also be converted into tachyzoites that are the cause of fatal toxoplasmic encephalitis in acquired immunodeficiency syndrome patients. In this review, I focus on recent efforts towards the characterisation of genes that encode several stage-specific isoenzymes. The picture emerging from these studies is that stage-specific expression of isoenzymes having different biochemical properties accompanies the interconversion of tachyzoite into bradyzoite, and vice versa. It can be hypothesised that the difference

found between these enzymatic activities may be instrumental in maintaining some major parasitic metabolisms such as glycolysis in pace with the stage-specific requirements of carbohydrate or polysaccharide biosynthesis.

Lyons *et al*, (2002) reported that *Toxoplasma gondii* infection undergoes stage conversion between the rapidly dividing tachyzoite in the intermediate host, which is responsible for acute toxoplasmosis and the slowly replicating, encysted bradyzoite stage. This process of tachyzoite-bradyzoite interconversion is central to the pathogenesis and longevity of infection. Recent research has identified several stage-specific genes and proteins. However, despite recent advances in the understanding of *Toxoplasma* cell biology, more research is necessary to elucidate the complex events occurring during tachyzoite-bradyzoite interconversion. Here, a brief summary of this process is provided and a new method to characterize gene expression during interconversion is introduced.

Khalil *et al*, (2002) tested a total of 153 serum samples from one-humped camels (*Camelus dromedarius*) and 45 serum samples from their drivers and herdsmen from Butana plains, Northern Kordofan and Southern Kordofan for *Toxoplasma gondii* antibodies by the Latex Agglutination Test (LAT). The seroreactivity of the camels was 22.2%, while 53.3% of the camels' drivers were positive by the same test. There was a relationship between the prevalence in camels and their drivers only in Butana plains ($P < 0.05$). No significant association was found between age in camels' drivers and seroreactivity ($P > 0.05$). The study suggests a widespread infection with *Toxoplasma gondii* among camels and their drivers especially those who consume and depend on cameline unboiled milk and raw liver.

Abu-Zeid (2002) used ELISA for detection of antibodies against the immunodominant surface antigen 1 (SAG1, synonymous P30) of *Toxoplasma gondii*, and peroxidase-conjugated protein G was used instead of commercially unavailable enzyme-conjugated anti-dromedary antibody. A latex agglutination test was employed to select 20 seronegative control animals, and peroxidase-conjugated protein A was used for comparison with protein G. The overall seroprevalence rate was 31.4%; males had to some extent higher seropositive rate than females ($P = 0.077$). Seropositive camels sampled in winter had significantly higher-antibody levels than those sampled in summer ($P < 0.01$). ELISA values using protein G and protein A conjugates were significantly correlated (Spearman's $\rho = 0.797$; $n = 185$; $P < 0.001$). The results were discussed.

Sroka *et al*, (2003) reported that abattoir workers are occupationally exposed to *Toxoplasma gondii* by the contact with raw meat. 107 abattoir workers from the Meat Factory in Lublin were examined for the presence of anti-*Toxoplasma* antibodies. 61 blood donors were also tested as the reference group. Sera from workers and referents were tested by direct agglutination with 2-mercaptoethanol (DA-2ME), and also by ELFA IgG and ELFA IgM tests. In the workers group, out of 107 tested sera, 70 were found positive (65.4%). The highest percentage of seropositive results was found in the Cured Meat Division 76.2%. In the Meat Production Division 66.6% of seropositive results were found, and in the Slaughter Division 46.1%. Three persons with the presence of IgM antibodies were found in the Cured Meat Division. In the reference group, 34 out of 61 sera (55.7%) were positive. The difference in seropositivity between Cured Meat Division workers and reference group was statistically significant ($p < 0.05$). The high percentage of seropositive reactions among the workers of Cured Meat Division and the

presence of persons in early stage of invasion suggest an increased risk of exposure to *T. gondii* in this section.

Coppin *et al*, (2003) studied that during infection in the intermediate host, *T. gondii* undergoes stage conversion between the rapidly replicating tachyzoite that is responsible for acute toxoplasmosis and the dormant or slowly dividing encysted bradyzoite. The tachyzoite-bradyzoite interconversion is central to the pathogenic process and is associated with the life-threatening recrudescence of infection observed in immunocompromised patients such as those suffering from AIDS. In chronic infections, the bradyzoites are located within tissue cysts found predominantly in brain and muscles. The tissue cyst is enclosed by a wall containing specific lectin binding sugars while the bradyzoites have accumulated large amounts of the storage polysaccharide of glucose, amylopectin. Our recent findings have identified several genes and proteins associated with amylopectin synthesis or degradation and glucose metabolism, including different isoforms of certain glycolytic enzymes, which are stage-specifically expressed during tachyzoite-bradyzoite interconversion. Here, we will discuss how the genes and enzymes involved in carbohydrate metabolisms are used as molecular and biochemical tools for the elucidation of molecular mechanisms controlling *T. gondii* stage interconversion and cyst formation.

Marco Saravia *et al*, (2004) determined the seroprevalence of *Toxoplasma gondii* in adult female llamas in two flocks of the Rural Alliance farm in the province of Melgar, Puno. A total of 157 blood samples were collected and analyzed using the indirect immunofluorescence test. The results indicated that $10.2 \pm 4.7\%$ (16/157) of llamas had

antibodies against *T. gondii*. One flock had $13.3 \pm 9.8\%$ (6/45) seroprevalence and the other one had $8.9 \pm 5.3\%$ (10/112); however, no significant statistical differences were found between flocks or age groups. The results showed a relatively low seroprevalence to *T. gondii* in relation to other studies in the country.

Gualberto *et al*, (2004) studied the seroprevalence of *Toxoplasma gondii* in female llamas from two farms located in the Melgar province, Puno. A total of 284 blood samples were tested using the indirect immunofluorescence test (IFAT) to detect antibodies against *T. gondii*. The results showed that $47.5 \pm 5.8\%$ (135/284) of the samples had antibodies and they increased with age. The seroprevalence from birth till 2 years, 2-4 years, >4-6 years, and >6 years was 33.8 ± 11.0 , 51.2 ± 10.8 , 56.8 ± 14.6 , and $50.6 \pm 10.5\%$, respectively. There were significant differences ($p < 0.05$) in the frequency of female reactors between farms.

Wolf *et al*, (2005) collected serum samples from a total of 871 South American Camelids (SAC: *Lama glama*, *Lama pacos*, *Lama vicugna*) from two farms in Peru and from 32 SAC of a farm in central Germany and these were examined for antibodies against *N. caninum* and *Toxoplasma gondii*. Based on the recognition of specific bands in the immunoblot, sera of SAC from Peru were differentiated into *N. caninum*-positive ($n = 18$) and *T. gondii*-positive ($n = 30$) samples and into samples negative or inconclusive for both parasites. Using the immunoblot results as the reference, a modified version of the p38-ELISA and the IFAT were evaluated for detecting *N. caninum* antibodies in SAC sera. Applying a cut-off as determined by two graph-receivers operating characteristic analysis both, the ELISA and the IFAT, exhibited a sensitivity and specificity of about

95% in the SAC sera from Peru. Serological testing confirmed that SAC may become infected with *N. caninum* under field conditions in Peru. In addition to alpacas and llamas also 114 wild living vicunas had been examined for antibodies against *N. caninum*. However, only the alpacas and llamas but no vicunas were found *N. caninum*-positive. In contrast, *T. gondii*-seropositive animals were detected in all three SAC species. The lack of *N. caninum*-seropositive vicunas indicates that in the study area in Peru wild canids might not serve as definitive hosts of *N. caninum* while for *T. gondii* a life cycle including wild felids is likely. On the German farm no *N. caninum*- but only *T. gondii*-seropositive SAC (n = 14) were detected. The seroprevalence of *T. gondii* infection was significantly higher in adult SAC (alpacas in Peru, llamas in Germany) than in crias (i.e. < 12 months old foals) indicating that the predominant route of infection is post natal.

Chávez-Velásquez et al, (2005) reported that *Toxoplasma gondii* infection in adult llamas (*Lama glama*) and vicunas (*Vicugna vicugna*) in the Peruvian Andean region, for which to date no information has been available. Serum samples from 43 llamas (*L. glama*) and 200 vicunas were tested by IFAT detecting titres of 1:50 or higher in 55.8% (33.9-70.9%) and 5.5% (2.8-9.6%), respectively. IFAT titres ranged from 1:50 to 1:6400. In order to avoid cross reactions with closely related coccidian parasites and to confirm the existence of *T. gondii* specific antibodies, IFAT positive sera from both ruminant species were also analysed by western blot. *T. gondii* specific antigens were recognised by IFAT positive sera, although different IFAT cut-off points could be selected for llamas (1:200) and vicunas (1:50) meaning seroprevalence of 44.2% (29.1-60.1%) and 5.5% (2.8-9.6%), respectively. Based on the frequency and intensity of tachyzoite antigen recognition, at least three immunodominant antigens with apparent molecular weights of

22-24, 30, and 38-40 kDa were detected, together with other minor protein fractions located in the 18-73 kDa range. This study documents for the first time the presence of *T. gondii* infection and reports the target *T. gondii* antigens in adult llamas and vicunas in Peru

Sadrebazzaz *et al*, (2005) used one hundred twenty camels were blood-sampled and to evaluate serological screening for *Neospora caninum* and *Toxoplasma gondii* infection by indirect fluorescent antibody test (IFAT) in Mashhad, Iran, during years 2004–2005. Of the 120 camels, antibodies to *N. caninum* were found in three in titers of 1:20 and in four in titers of 1:40 using whole *N. caninum* tachyzoites as IFAT slide. Antibodies to *T. gondii* were found in three camels in titers 1:20 and in two camels in titers 1:40 using whole *T. gondii* tachyzoites as IFAT slide.

Yousif *et al*, (2005) reported that camels exposure to *toxoplasmosis* is mainly through ingesting the *oocysts* from the environment and therefore genotyping of *T. gondii* in camels is a good indicator of prevalent genotypes of *T. gondii* in their environment. meat and blood samples were collected from Al khazna Tannery in Abu Dhabi from 58 camels. Serological diagnosis was done using the modified agglutination test (MAT) and P30 ELISA, DNA extraction from meat of serologically positive camels and genotyping of isolates was done by nested PCR at the SAG2 locus followed by restriction fragment length polymorphism (RFLP). Thirteen sera samples were found positive in both serological tests, whereas 8 only by MAT and 3 only by P30 ELISA. Therefore the *Toxoplasma gondii* sero-positive rate among slaughtered camels from Abu Dhabi ranged between 22.4 to 41.4%. Such high prevalence rate is in agreement with previously

reported sero-prevalence rates of greater than 30% among camels in UAE. Most strains typed were genotype I or II, none was type III. The significance of the results with regard to possible impact on humans is discussed.

Sawadogo *et al*, (2005) studied 261 sera from animals intended for consumption in Marrakech were subjected to the *Toxoplasma* ELISA based serology test for the detection of anti-*T. gondii* specific IgG confirming a past infection. Of the total tested 72 (27.6%) sera were positive for IgG. This result shows that the seroprevalence approaches the world average and is similar to what is found in other cities of Morocco. This has prompted us to investigate other animal species in the region in order to evaluate the degree of contamination by this parasite as well as the potential risk incurred on consumption of their meat.

Hughes *et al*, (2005) reported that *Neospora caninum* and *Toxoplasma gondii* are closely related intracellular protozoan parasites. Little is known about the extent of *Neospora/Toxoplasma* co-infection in naturally infected populations of animals. Using nested PCR techniques, based on primers from the Nc5 region of *N. caninum* and SAG1 for *T. gondii*, the prevalence of *N. caninum* and its co-infection with *T. gondii* were investigated in populations of *Mus domesticus*, *Rattus norvegicus* and aborted lambs (*Ovis aries*). A low frequency of infection with *N. caninum* was detected in the *Mus domesticus* (3%) and *Rattus norvegicus* (4.4%) populations. A relatively high frequency of infection with *N. caninum* was detected in the brains of aborted lambs (18.9%). There was no significant relationship between *N. caninum* and *T. gondii* co-infection. Investigation of the tissue distribution of *Neospora*, in aborted lambs, showed that

Neospora could not be detected in tissues other than brain and this was in contrast to *Toxoplasma* where the parasite could be frequently detected in a range of tissues.

Tibary *et al*, (2006) reported that reproductive losses in camelids are due to infertility, pregnancy loss, udder diseases and neonatal mortality caused by a variety of infectious diseases. Uterine infection and abortion represent the major complaint in camelid veterinary practice. The major infectious organisms in endometritis and metritis are *E. coli* and *Streptococcus equi* subspecies *zooepidemicus*. Abortion rates due to infectious diseases vary from 10% to more than 70% in some areas. Leptospirosis, toxoplasmosis and chlamydiosis have been diagnosed as the major causes of abortion in llamas and alpacas. In camels, brucellosis and trypanosomiasis represent the major causes of infectious abortion in the Middle East and Africa. Mastitis is rare in South American camelids. The prevalence of subclinical udder infection in camels can reach very high proportions in dairy camels. Udder infections are primarily due to *Streptococcus agalactiae* and *Staphylococcus aureus*. Neonatal mortality is primarily due to diarrhea following failure of passive transfer and exposure to *E. coli*, rotavirus, coronavirus, *Coccidia* and *Salmonella*. This paper reviews the etio-pathogenesis of these causes of reproductive losses, as well as the major risk factors and strategies to prevent their occurrence.

Karimi (2006) tested blood samples from 600 native camels (*Camelus dromedaries*) for *toxoplasma gondii* antibodies by the indirect fluorescent antibodies test (IFA). Of these samples 36 (6%) were seroreactivity positive for *T. gondii* antibodies. The prevalence rate of seroreactivity increased with age and was highest among camels aged over 6 years

(9.58%). The prevalence was higher in male (5.9%) camels. There were no sex and age linked seroreactivity differences ($p < 0.05$)

Dubey *et al*, (2006) studied that *Neospora caninum*, *Sarcocystis* spp, and *Toxoplasma gondii* are related coccidian parasites that can cause abortion and neonatal mortality in animals. In addition, *T gondii* and certain species of *Sarcocystis* are zoonotic. This article reviews information on the etiology, diagnosis, control, and prevention of these diseases

Innes *et al*, (2007) it is sometimes easy to make the mistake of assuming that everything that holds true for *Toxoplasma gondii* is also true for its relative *Neospora caninum*. However, a recurring theme in the recent review by Hemphill *et al*. is not the similarities but the striking differences between the two parasites.

MATERIAL & METHODS

CHAPTER 3

MATERIAL AND METHODS

Experimental site:

The study was conducted at various camel colonies of Bahawalpur and Department of Parasitology, University of Veterinary & Animal Sciences, Lahore.

Collection of samples:

A total of 100 blood samples of camels were collected at random from various camel colonies of Bahawalpur. The record/history of each animal was recorded in performa. Under aseptic measures, 5-10 ml of blood was drawn from each camel by vein puncture with the help of disposable syringes and was transferred to screw capped sterile test tube, slowly to avoid haemolysis.

Separation of serum:

All the blood samples were labelled with number and date of collection. The samples were left for about an hour for blood clotting to occur. The clotted blood was then separated with the help of a fine loop and blood samples were centrifuged at 3500 rpm for at least 5 minutes. The supernatant clean sterile blood was aspirated with a pasture pipette and transferred into a screw capped vial which was stored at -20°C degree until processed for analysis.

Analysis of serum samples:

All the serum samples were analyzed for *Toxoplasma* specific IgG antibodies using Latex Agglutination, (LA) test. For this purpose, the commercial Toxoplasma Latex test kit was used.

Reagent and Controls:

The commercial test kit for Toxoplasma latex tests contains the following contents.

- 1 x 4.0ml Latex reagent
- 1 x 0.5ml positive control
- 1 x 0.5ml negative control slide-4
- Disposable Stirrers

Storage and stability of Toxoplasma Latex Kit:

All the components were stored between 2-8 C to maintain the stability of the contents according to the manufacturer's recommendations.

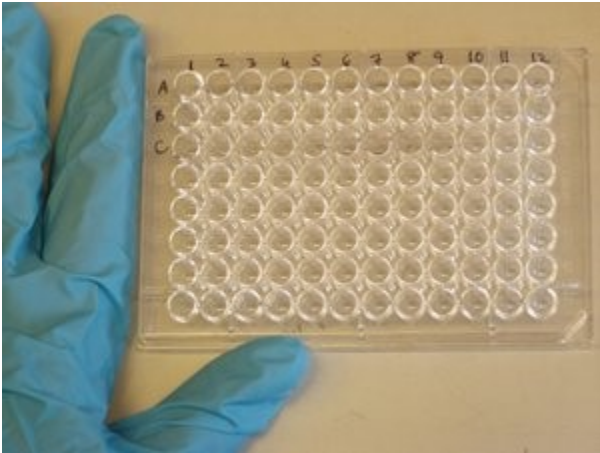
Technique:

The Toxoplasma kit was used according to the manufacturer's instructions.

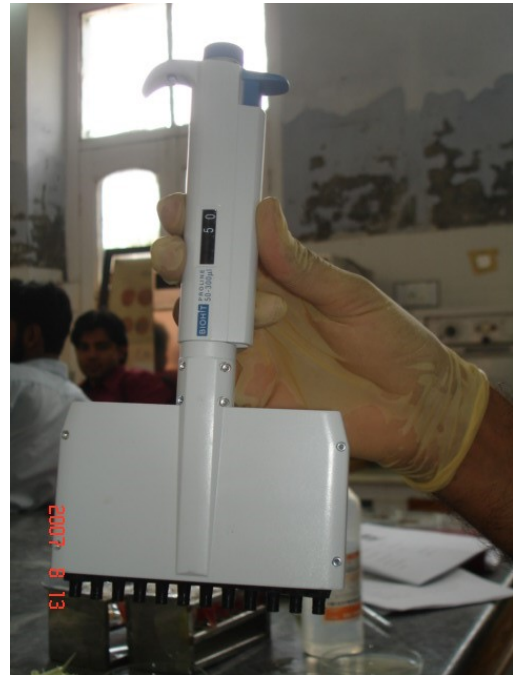
1. Prior to running the assay, all test reagent, was brought to average room temperature (20 C°) and sera was thawed.
2. 25 microlitre of physiological normal saline (0.9% NaCl) solution (N.S.S) was added to each well of 96 microlitre plate with the help of micro dispenser. The 25 microlitre of the test sera was added to the first well. This was mixed with N.S.S and 25 microlitre from this was then be transferred to the adjacent well and so on. 25

microlitre of the mixture was discarded from the last well. In this serial, dilutions was made by two fold dilution technique to 8th well 1:256.

3. One drop of diluted serum each from 1:16, 1:128, and 1:256 dilutions was placed on to a slide.
4. The latex reagent was mixed well and one drop of reagent was added over each Serum drop.
5. Both drops were mixed well with the aid of a disposable stirrer and slide was tilted slightly.
6. The presence or absence of agglutination was observed within a period no longer than five minutes.
7. The antibody titre was shown by the significant agglutination in different dilution of the test serum.



Micro Titer plate



Micro Titer pipette



The Toxoplasma Latex Kit

Interpretation of Results:

The following interpretation was made:

Negative: 1:16 sera dilution indicates absence of immunity

Positive: 1:16 Sera dilution was indicating residual or non specific immunity.

Positive: titre from 1:32 to 1:128 depicts acquired or evolving immunity.

Positive: titre equal or higher than 1:256 suggest possible recent contact

Seroprevalance:

The data was analyzed at different angles by calculating the Percentage of seropositivity of *Toxoplasma gondii*.



Dispensing of Serum Samples and Latex Reagent



Stirring of serum sample and Latex Reagent

RESULTS

CHAPTER 4

RESULTS

Prevalence of *Toxoplasmosis* in Camels:

A total 100 blood samples of camels were collected and analyzed for anti-toxoplasma antibodies at screening dilution of 1:16, 1:128, 1:256 by using commercially available Toxoplasma Latex Kit on the principle of Latex Agglutination Test (LAT).

The camels age ranged from 1-15 years & above blood samples were taken and divided into 3 categories i.e. A-1, A-2, A-3. Twenty samples were taken from age (A-1) ranged between 1-5 years, 36 samples were taken from age (A-2) ranged between 6-10 years and 44 samples were taken from age (A-3) ranged between 11-15 years & above (Table 1). The age categories (A-2) ranged from 6-10 year had the highest seropositive percentage that was 16.6 % followed by A-3 (11-15 yr & above) that was 9.0 %, whereas the number of samples tested in A-1 (1-5 yr) had no positive case (Table 1 & Figure 1).

As for as the sex of camels was concerned, 46 were male and 54 female (Table 2). Female camels have higher seropositive percentage (11.1 %) than male (8.69 %) (Figure 2).

The overall seropositive percentage was 10%. According to antibodies titer, 2 camels showed antibody titer at screening dilution of 1:16, 5 camels showed antibody titer at 1:128 and 3 showed antibody titer at screening dilution of 1:256 (Table 1).

Table 1. Overall Prevalence of *Toxoplasma gondii* antibodies in Camels by using Latex Agglutination Test (LAT) in relation to their Age.

Age (Years)	No of sera Tested	Antibodies Titer			Seropositive	% Seropositive
		1:16	1:128	1:256		
A-1 (1-5)	20	0	0	0	0	0
A-2 (6-10)	36	01	03	02	06	16.6 %
A-3 (11-15) & above	44	01	02	01	04	9.0 %
Total	100	02	05	03	10	10 %

A= Age

Figure 1. Overall Prevalence of *Toxoplasma* antibodies in Camels by using Latex Agglutination Test (LAT) in relation to their Age.

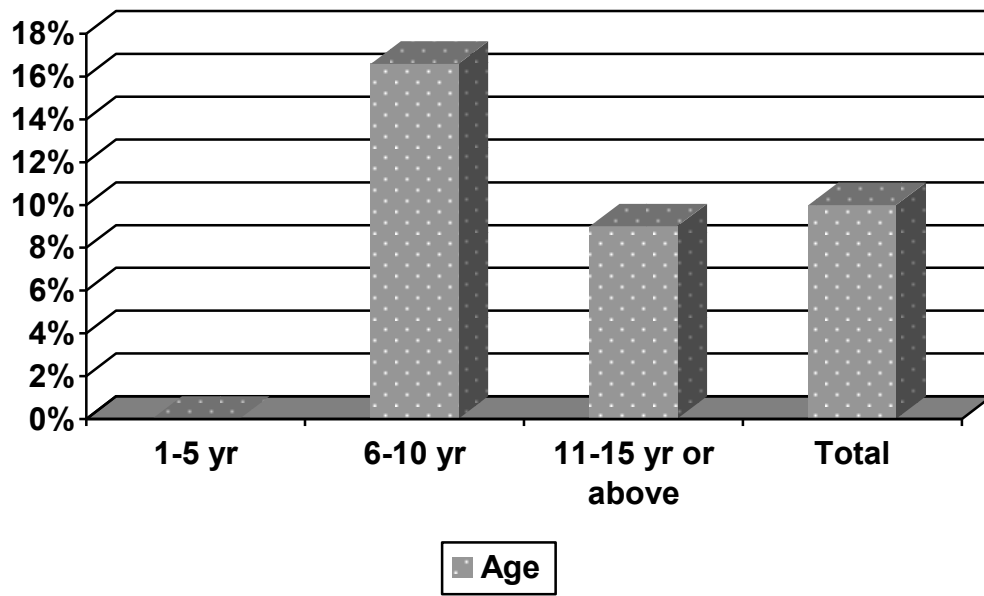
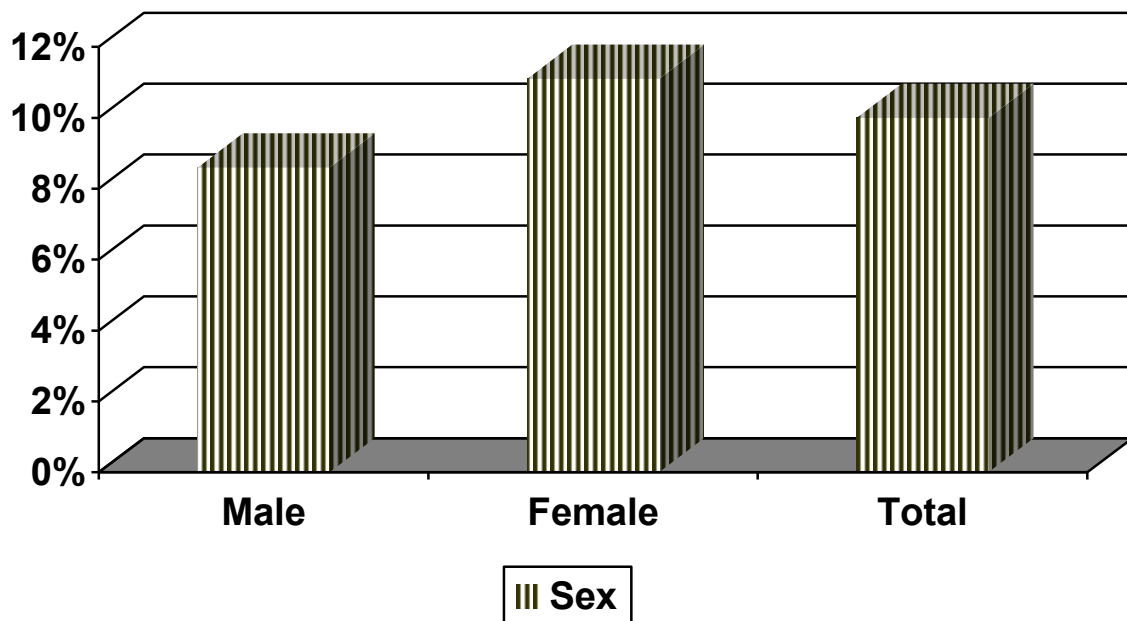
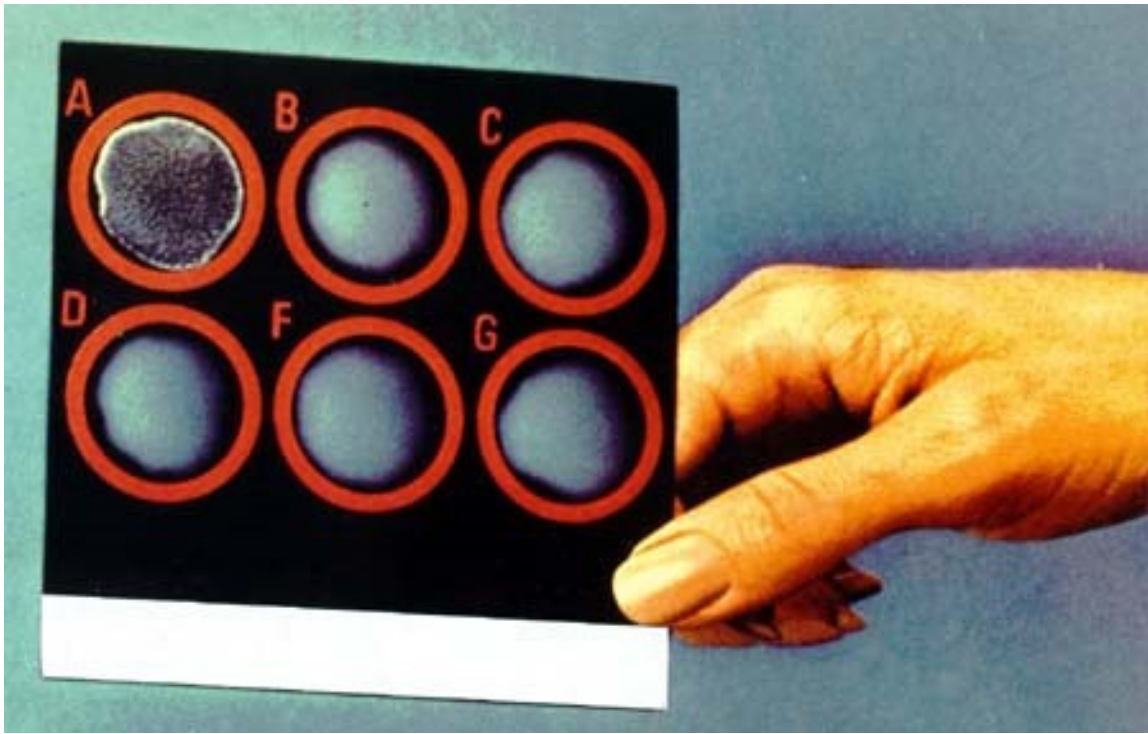


Table 2. Overall Prevalence of *Toxoplasma gondii* antibodies in Camels by using Latex Agglutination Test (LAT) in relation to their Sex.

Sex	No of sera Tested	Antibodies Titer			Seropositive	% Seropositive
		1:16	1:128	1:256		
Male	46	01	02	01	04	8.69 %
Female	54	01	03	02	06	11.1 %
Total	100	02	05	03	10	10 %

Figure 2. Overall Prevalence of *Toxoplasma* antibodies in Camels by using Latex Agglutination Test (LAT) in relation to their Sex.





**Agglutination of Latex Reagent with Antibodies
at screening dilution of 1:16, 1:128, 1: 256**

DISCUSSION

CHAPTER 5

DISCUSSION

Toxoplasmosis is one of the most common infection in men and animals cause by protozoan parasite *T. gondii*, which is responsible for significantly higher morbidity, and mortality in both human and other warm-blooded animals. Toxoplasmosis is world wide distribution, zoonotic in nature and depending upon the geographic location. 15-85% of the population can be symptomatically infected (Subash 1990). *Toxoplasmosis* is also responsible for abortion and congenital defects in human and domestic livestock including sheeps, goats, camels, cows and buffaloes (Pedro *et. al.*, 2003).

T.gondii can cause severe acquired and congenital infection in animals as well as human beings associated with fever, lymphadenitis, uveitis, muscle fatigue, hepatitis, encephalitis and abortion. Serological surveys indicate that about 80 % of all primary infections are asymptomatic, due to the immune system effectiveness, but variable levels of the disease can affect immunocompromised individuals (Cantos *et. al.*, 2000). The acquired immune deficiency syndrome (AIDS) has created an expanding population of susceptible individuals. Usually people suffering from both AIDS and *Toxoplasmosis* have been exposed to the *Toxoplasma* parasite earlier in life and the HIV infection simply allowed the *Toxoplasma* parasite to grow unchecked. The concomitant occurrences should be considered by public health policies especially in those countries with high Toxoplasmosis prevalence, where AIDS is concurrent with economic and public health

problems (Passos *et. al.*, 2000). *Toxoplasma gondii* infection is embrotoxic in humans as well as animals. It is mainly transmitted through raw or undercooked meat and ingestion of oocysts in cat feces.

Toxoplasmosis in camels is important because of its zoonotic importance and camels are main source of meat consumption in Pakistan. Due to the zoonotic importance of toxoplasmosis, the present study was conducted to sort out the seroprevalence of *T. gondii* infection in camels in & around Bahawalpur areas by using commercially available Toxoplasma Latex Agglutination kit (LAT). In this study 100 blood samples of camels were collected from camel colonies at Bahawalpur. Serum was separated after centrifugation. The data about the age and any disease history was noted and the results thus obtained were recorded in separate performa.

Among 100 camels examined in the present study, 2 gave an antibody titer of 1:16 which indicated residual or non specific immunity, 5 gave antibody titer of 1:128 which was due to acquired or evolving immunity, where as three camels were positive at antibody titer of 1:256 strongly suggested present infections as reported by (Fanck *et. al.*, 2004).

The overall prevalence of anti toxoplasma antibodies in camels was recorded as 10 %. *Toxoplasma gondii* antibodies are widly spread in animal's population, which supported that *toxoplasmosis*, is widely spread zoonotic infection (Mirdha *et. al.*, 1999). Various researchers recorded the prevalence of anti *toxoplasma* antibodies in camels using different serological tests including Latex agglutination test (LAT) by Chaudhary *et al*, (1996) at Abu-Dhabi (18%), Abu-Zeid (2002) at Abu-Dhabi (31.4%), Khalil *et al*, (2002) at Sudan (22.2%), Hilali *et al*, (1998) at Egypt (17.4%), Afzal *et al*, (1994) at

Abu-Dhabi (30.9%) Elamin *et al.*, (1991) at Sudan (67%). Indirect Fluorescent antibodies test (IFT) i.e. A. Sadrebazzaz *et al.*, (2005) in Iran (4.16%), Karimi (2006) in Iran (6%). Indirect Haemagglutination test (IHAT) . Hussein MF *et al.*, (1998) in Saudi Arabia (16%), Ibrahim *et al.*, (1997) in Egypt (44.1%), Yousif *et al.*, (2005) in Abu-Dhabi (22.4%). The variation in seroprevalence results of *Toxoplasmosis* in camels in different part of the world was due to difference in environmental and managerial conditions in various geographical areas.

The seroprevalence of *T.gondii* in camels varied with age. The highest (16.6%) seropositive percentage was found in A-2 (6-10 yr) followed by (9.0%) A-3 (10-15 yr & above) and no seropositive case was recorded in A-1 (1-5 yr). These findings are in concomitant with the results of Gualterbo Marcos *et al.*, (2004), Elamin *et al.*, (1991), Karimi (2006).

As far as sex of camels was concerned, female camels have the higher seropositive percentage i.e. 11.1% most of them having a history of abortion followed by male camels i.e. 8.69%. The present study revealed that the prevalence of anti toxoplasma antibodies more in female camels than male was in concomitant with the results of Hussein MF *et al.*, (1998).

From the current data, it was concluded that prevalence of *Toxoplasmosis* in camels was 10%. Camels in group A2 from 6-10 years were found to be more commonly affected than other groups and infection was higher in females than males.

The prevalence of toxoplasma infection in humans and animals is often associated with infection in pets. Little attention however has been given to domestic pet despite their intimate contact with animals and their feed. Toxoplasma is a true zoonosis occurring in man, domestic and wild animals and birds. Although only a preliminary study showed that the chances of contacting toxoplasma, through the ingestion of oocyst is very high. Keeping in view of these findings, following preventive measures should be adopted to reduce the exposure rates.

Recommendations:

TO REDUCE EXPOSURE IN CAMELS

- 1) Pets especially cat should be kept away from animal feed and grazing areas to avoid contamination by cat faeces.
- 2) Pets' litter should not be disposed off in yard or grazing areas.
- 3) Camels should be fed only clean and hygienic feed.
- 4) Proper screening at regular interval must be done

SUMMARY

CHAPTER 6

SUMMARY

Toxoplasma gondii is an intracellular parasite, which infects humans and animals by ingestion of tissue cyst, raw or undercooked meat or oocysts from soil, vegetables, fruits, water, soil and food contaminated by cat faeces or by transmission through the placenta, milk and blood transfusion. Although toxoplasmosis found throughout the world. Seropositivity levels vary widely among different regions of the globe and according to sociocultural habits, geographic factors; climate and transmission routes and typically rise with age.

In present study, the overall prevalence of *T. gondii* infection in camels at Bahawalpur recorded as 10% by using Toxoplasma Latex Agglutination kit (LAT). 2 camels were found seropositive at 1:16 dilution showing residual or non specific immunity, 5 camels were found seropositive at 1:128 showing acquired or evolving immunity, whereas 3 camels were positive at antibody titer of 1:256 giving an evidence of present infection.

It was also noted that seropositivity of *T. gondii* in camels was higher in age group from 6-10 years, infection was higher in female camels having abortion history than male.

LITERATURE CITED

CHAPTER 7

LITERATURE CITED

Ahmed A, Miura T, Takasu T, Kono R and Ogata T **(1983)** Seroepidemiological study of infection with West Nile virus in Karachi, Pakistan. J Med Virol.26(3):243-7.

Amin AM and Morsy TA. **(1997)** Anti-toxo antibodies in butchers and slaughtered sheep and goats in Jeddah Municipal abattoir, Saudi Arabia. J Egypt Soc Parasitol. 27(3):913-8.

Abu-Zeid YA. **(2002)** Protein G ELISA for detection of antibodies against Toxoplasma SAG1 in dromedaries. J Egypt Soc Parasitol. 32(1):247-57.

Sadrebazzaz A , H. Haddadzadeh and P. Shayan **(2006)** Seroprevalence of Neospora caninum and Toxoplasma gondii in camels (Camelus dromedarius) in Mashhad, Iran. Parasitol Res. 98(6):600-1.

Afzal M and Sakkir M **(1994)** Survey of antibodies against various infectious disease agents in racing camels in Abu Dhabi Rev Sci Tech. 13(3):787-92.

Chávez-Velásquez A, Alvarez-García G and Gómez-Bautista M, **(2005)** Toxoplasma gondii infection in adult llamas (Lama glama) and vicunas (Vicugna vicugna) in the Peruvian Andean region. Vet Parasitol. 130(1-2):93-7.

Chantal J, Bessière MH, Le Guenno B and Magnaval JF **1996)** Serologic screening of certain zoonoses in the abattoir personnel in Djibouti. Bull Soc Pathol Exot.

89(5):353-7.

CoppinA, DzierszinskiF, LegrandS and MortuaireM **(2003)** Developmentally regulated biosynthesis of carbohydrate and storage polysaccharide during differentiation and tissue cyst formation in *Toxoplasma gondii*. *Biochimie*. 85(3-4):353-61.

Cantos G.A, Prando MD, Siqueira MV and Teixeira RM **(2000)**

Dubey JP and Lindsay DS **(2006)** Neosporosis, toxoplasmosis, and sarcocystosis in ruminants. *Vet Clin North Am Food Anim Pract*. 22(3):645-71

Dubey JP. **(1999)** Advances in the life cycle of *Toxoplasma gondii*. *Int J Parasitol*. 28(7):1019-24.

Dubey JP, Rickard LG and Zimmerman GL **(1992)** Seroprevalence of *Toxoplasma gondii* in llamas (*Lama glama*) in the northwest USA. *Vet Parasitol*. 44(3-4):295-8.

DE Hill and Dubey JP, **(1998)** Prevalance of viable *T.gondii* in beef, chicken, pork from retail meat stores in the United States: risk assessment to consumers.

El Ridi AM, Nada SM, Aly AS, Habeeb SM and Aboul-Fattah MM. **(1990)** Serological studies on toxoplasmosis in Zagazig slaughterhouse. *J Egypt Soc Parasitol*. 20(2):677-81.

Elamin EA, Elias S, Dauschies A and Rommel M. **(1991)** Prevalence of *Toxoplasma gondii* antibodies in pastoral camels (*Camelus dromedarius*) in the Butana plains, mid-Eastern Sudan. *Vet Parasitol*. 43(3-4):171-5.

Fortier B, Coignard-Chatain C, Soete M and Dubremetz JF. **(1996)** Structure and biology of *Toxoplasma gondii* bradyzoites. C R Seances Soc Biol Fil. 190(4):385-94.

Fanck KE and Tsai YJ (2004) serological survey of *toxoplasma gondii* infection among slaughtered pigs in north west Taiwa. J parasitol. 90(3):653-4.

Gorman T, Arancibia JP, Lorca M and Hird D **(1999)** Seroprevalence of *T. gondii* infection in sheep and alpacas (*Llama pacos*) in Chile. Prev Vet Med. 40(3-4):143-9.

Gualberto Marcos C. Amanda Chávez V and Eva Casas A. **(2004)** Seroprevalencia de *Toxoplasma gondii* en llamas de dos fundos ganaderos de la provincia de Melgar, Puno. Veterinary Parasitology. 43: 171-175.

Urquhart G M, J. Armour, JL. Duncan and Am.Dunn, FW. **(1996)** Veterinary Parasitology. Jennings Blackwell publication.

Hussein MF, Bakkar MN and Basmacil SM. **(1988)** Prevalence of toxoplasmosis in Saudi Arabian camels (*Camelus dromedarius*). Vet parasitol. 28(1-2) : 175 -8.

Hilali M, Romand S, Thulliez P, Kwok OC and Dubey JP **(1998)** Prevalence of *Neospora caninum* and *Toxoplasma gondii* antibodies in sera from camels from Egypt. Vet Parasitol. 75(2-3):269-71.

Hagemoser WA, Dubey JP and Thompson JR **(1990)** Acute toxoplasmosis in a camel. J Am Vet Med Assoc. 15;196(2):347.

- Hughes JM, Williams RH, Morley EK, Cook DA, Terry RS and Murphy RG, **(2006)** The prevalence of *Neospora caninum* and co-infection with *Toxoplasma gondii* by PCR analysis in naturally occurring mammal populations. *Parasitology*.132(Pt 1):29-36
- Innes EA and Mattsson JG **(2007)** *Neospora caninum* emerges from the shadow of *Toxoplasma gondii*. *Trends Parasitol.* 23(2):43-4
- Ibrahim BB, Salama MM, Gawish NI and Haridy FM **(1997)** Serological and histopathological studies on *Toxoplasma Gondii* among the workers and the slaughtered animals in Tanta Abattoir, Gharbia Governorate. *J Egypt Soc Parasitol.* 27(1):273-8.
- Khalil K.M and I.E. Elrayh **(2002)** Prevalence of *Toxoplasma gondii* antibodies in camels and their drivers in three ecologically different areas in Sudan.
- Lings S, Lander F and Lebech M. **(1994)** Antimicrobial antibodies in Danish slaughterhouse workers and greenhouse workers. *Int Arch Occup Environ Health.*65(6):405-9.
- Lyons RE, McLeod R and Roberts CW **(2002)** *Toxoplasma gondii* tachyzoite-bradyzoite interconversion. *Trends Parasitol.*18(5):198-201
- Lyons RE, Lyons K, McLeod R and Roberts CW. **(2001)**Construction and validation of a polycompetitor construct (SWITCH) for use in competitive RT-PCR to assess tachyzoite-bradyzoite interconversion in *Toxoplasma gondii*. *Parasitology.*123(Pt

5):433-9.

MirdhaBR, Samantaray JC and Pandey A **(1999)** seropositivity of toxoplasma gondii in domestic animals . Indian J Public health. 43(2):91-2.

Morris MT, Coppin A, Tomavo S and Carruthers VB.**(2002)** Functional analysis of Toxoplasma gondii protease inhibitor 1. J Biol Chem.22;277(47):45259-66.

Ma Y, Jin T, Wang L, Yang T, Li L and Zhang L. (2002) Study on the behavioral risk of toxoplasma infection in population working in the slaughterhouse. Zhonghua Liu Xing Bing Xue Za Zhi. 23(1):43-5.

Marco Saravia P. Amanda Chávez V. Eva Casas A. and Néstor **(2004)** Seroprevalencia de Toxoplasma gondii en llamas de una empresa pecuaria en Melgar, Puno.

Omid Karimi, **(2006)** agricultural & natural resources research centre of yazd province yazd Iran

Pedro N. Acha and Boric Szyfres, **(2003)** Zoonoses & communicable diseases common to man & animals. Third edition, PAHO HQ Library cataloguing- in – publication.

Passos L.N, Araujo Filho and Andrade JR **(2000)** Toxoplasma encephalitis in AIDA patients in sao paulo during 1988 & 1991. A comparative retrospective analysis. Rev. Inst. Med. Trop. S. Paul. 42:141-145.

Remington JS, McLeod R and Desmonts G. **(1995)** Toxoplasmosis. Infectious diseases of the fetus and newborn infant, 4th ed., In: JS Remington and JO Klein (ed.) (W.B. Saunders Co.,Philadelphia):140-266.

Simth J. E. **(1995)** Ubiquitous intracellular parasite, the cellular biology of *T. gondii*. Int J parasitol. 25:1301-1309.

Subash Ch. Parija, **(1990)** Review of parasitic Zoonoses. AITBS Publication Delhi.

Sroka J, Zwoliński J and Dutkiewicz J. **(2003)** the prevalence of anti-Toxoplasma gondii antibodies among abattoir workers in Lublin. Wiad Parazytol. 49(1):47-55.

Sawadogo P, Hafid J, Belleste B, Sung RT, Chakdi M, Flori P and Raberin H, **(2005)** Seroprevalence of *T. gondii* in sheep from Marrakech, Morocco. Vet Parasitol. 130(1-2):89-92.

Torada A. **(2001)** Toxoplasmosis: are cats really the source. Aust fam physician. 28: 743-747.

Tibary A, Fite C, Anouassi A and Sghiri A. **(2006)** Infectious causes of reproductive loss in camelids. Theriogenology. 66(3):633-47.

Tomavo S. **(2001)** the differential expression of multiple isoenzyme forms during stage conversion of *Toxoplasma gondii*: an adaptive developmental strategy. Int J Parasitol 31(10):1023-31

Wolf D, Schares G, Cardenas O, Huanca W, Cordero A, Bärwald A and Conraths FJ **(2005)** Detection of specific antibodies to *Neospora caninum* and *Toxoplasma gondii* in naturally infected alpacas (*Lama pacos*), llamas (*Lama glama*) and vicunas (*Lama vicugna*) from Peru and Germany. Vet Parasitol. 130(1-2):81-7

Yousif A. and Abu-Zeid, **(2005)** Genotyping of *Toxoplasma Gondii* Isolates from Camels from Abu Dhabi. Department of Biology.

Chaudhary Z.I , J.Iqbal, M. Raza and M. I. Kandeel, **(1996)** Haematological and
Biochemical studies on Toxoplasmosis in racing camels- A preliminary report.
Journal of Camel Practice & Research.